Case 17-05244 Doc 5 Filed 02/23/17 Entered 02/23/17 14:19:35 Desc Main Page 1 of 1 Document

Debtor 1 JESSE First Name Middle Name Debtor 2 (Spouse, if filing) United States Bankruptey Count for the: Case number (If known)	DAVIS SR Last Name Last Name ern District of Illinois	UNITED STATES BAN NORTHERN DISTRIBUTED STATES BAN NORTHERN DIS	NKRUPTCY COURT ICT OF ILLINOIS 2017
Official Form 103A			
Application for Individua	ls to Pay the	Filing Fee in Installn	nents 12/15
Be as complete and accurate as possible. If two r			
information.			
Part 1: Specify Your Proposed Paymen	t Timetable		
Which chapter of the Bankruptcy Code are you choosing to file under?	☐ Chapter 7		
	☐ Chapter 11		
	Chapter 12		
	☑ Chapter 13		
 You may apply to pay the filing fee in up to four installments. Fill in the amounts you propose to pay and the dates you plan to pay them. Be sure all dates are business days. Then add the payments you propose to pay. 	You propose to pay	With the filing of the petition 03/23/20	17
You must propose to pay the entire fee no later than 120 days after you file this bankruptcy case. If the court approves your application, the court will set your final payment timetable.	\$_80	On or before this date	17
	\$ 80	On or before this date	17
	+ \$ 70	On or before this date	17 D / YYYY
Total	\$ 310	◀ Your total must equal the entire fee for th	e chapter you checked in line 1.
Part 2: Sign Below			
By signing here, you state that you are unable to	o pay the full filing fee at o	nce, that you want to pay the fee in instal	iments and that you
understand that:			
You must pay your entire filing fee before you preparer, or anyone else for services in conne			ankruptcy petition
You must pay the entire fee no later than 120 debts will not be discharged until your entire fe		nkruptcy, unless the court later extends your	deadline. Your
If you do not make any payment when it is due may be affected.	e, your bankruptcy case may	be dismissed, and your rights in other bankr	uptcy proceedings
× (a) ×_		x	
Signature of Debtor 1 Si	gnature of Debtor 2	Your attorney's name and	signature, if you used one

Date MM / DD / YYYY

Signature of Debtor 2

Date 0 2 3 3 3 2 1 7 MM / DD / YYYY

MM / DD / YYYY

Your attorney's name and signature, if you used one